

**HSC RECOMMENDATIONS FOR ADDRESSING THE FAIRFAX-FALLS CHURCH CSB PROPOSED FY 2013 SHORTFALL**

**Actions Presented to the BOS on May 8, 2012 Outlined in the CSB's Proposed Budget Management Plan**

**Attachment 2**

**24-Jul-12**

Item #	Proposed Actions (May 8, 2012 CSB Budget Management Plan) 1/	CSB budget management action	Associated Position Reduction	HSC Recommendation	Potential Impact	CSB Proposed Strategies To Implement the Actions	Human Services Council Comments
1	Close New Horizons	(\$507,732)		Proposed Action not Recommended	Closing New Horizons for intensive day service to adults with co-occurring mental health and substance abuse disorders -savings proposed were partial year, reflecting 9 months. Closure would have impacted 8 clients and 12 individuals in aftercare program. Funding associated with 17 SYE merit positions.		Not recommended by the Council. Council heard persuasive community input regarding significant negative impact of this proposed action.
2	Close Sojourn House	(\$283,768)		Proposed Action not Recommended	Closing Sojourn House, 8 bed residential mental health treatment for female youth. Savings proposed were partial year, reflecting 9 month savings and corresponding GF transfer reduction.	Funding through the Comprehensive Services Act on a fee for service basis that fully reflects cost of services to be explored; alternate operating strategies (including privatizing operations) are included in the County Executive's Work Plan.	Not recommended by the Council. Council received information from the Juvenile and Domestic Relations District Court judges regarding the negative impact to the courts should dedicated in-community services to female youth not be available.
3	Eliminate Gartlan Center Emergency Services	(\$111,922)		Proposed Action not Recommended	Consolidation of emergency mental health services through Woodburn Center - reflected partial year savings and corresponding GF transfer reduction. Would have resulted in shifting emergency response to a central location in mid-County, with potential for delays in acute care/treatment and interventions.		Not recommended by the Council. Council heard community input from the Fairfax County Police Department and representatives of Mount Vernon community regarding negative impact of this proposed action.
4	Eliminate Daytime Shift Mobile Crisis Services	(\$194,658)		Proposed Action not Recommended	Proposal to eliminate the daytime shift for crisis intervention, assessments and psychiatric evaluations.		Not recommended by the Council. Council heard community input that staffing reductions associated with this proposed action would result in shifting responsibility for treatment and interventions to other partner human services and public safety personnel.
5	Delay the start of <b>Early Intervention Services for Infant and Toddler Connection (ITC)</b> for new admissions (full-year funding impact).	(\$1,000,000)		<p><b>Proposed Action Recommended:</b> <b>Request State funding</b></p> <p><b>Option: reserve \$500,000</b></p>	<p>The projected CSB budget shortfall is estimated at \$1.0 million to support projected increased demand for services.</p> <p>The current budget would support services for an average of 988 children and families. In FY2012, the average need for services was 1,155 children and families per month.</p> <p>Whenever the demand goes over 988 children/families each month, ITC will either go into deficit if services are provided or the children and families will have to wait for those services.</p>	<p>Advocate to the General Assembly for additional state funding necessary to meet this mandate.</p> <p>At the present time there is an estimated \$8.4 million shortfall statewide for this program. Request through Secretary Hazel and the Governor that the Commonwealth fully fund ITC for FY 2013 and FY 2014.</p>	As an option to allow for flexibility in addressing this critical state funding gap, the Council recommends Board of Supervisors authorize a \$500,000 set-aside in the event that the state advocacy efforts fall short. These funds would only be used as a resource of "last resort". At current state funding levels and projected service utilization, state funds would be exhausted as early as mid-February. Even with these efforts, service containment measures such as a waiting list and limited services may still be necessary.

<sup>1</sup> Because of the timing of the BOS Carryover Review, full-year savings are not attainable for many of these items.

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6	Limit any new funds for the contracted <b>Employment and Day Services to former and current graduates</b> of the Fairfax County Public Schools who have intellectual disabilities and are currently receiving services.	<b>(\$725,000)</b>		<b>Proposed Action Recommended: Request budget authority of additional \$1.8 million</b>	<p>The Council recommends adding \$1.8 million in funds to partially fund anticipated demand for FY 2013.</p> <p>This additional funding will only partially fund the need: all currently enrolled in contract services and 19 at risk 2012 graduates.</p> <p>An additional 45 graduates will not be served until openings or additional funding of \$725,000 is identified.</p>	Any service utilization changes should include an inclusive and thoughtful process to allow for a phasing period and include dialogue with the community and CSB Board. Staff should present a variety of options for managing service utilization and provide a cost analysis for phasing in each option over a two-year period.	<p>It is recommended that the funding to serve the additional 19 school grads (an additional \$580,000) and the balance of funds required for current consumers (\$1.2 million) be allocated from the reserve balance.</p> <p>Total funds recommended for FY 2013 for these two components : \$1.8 million .</p>
7	Eliminate funding for <b>Emergency Services at Northwest Center</b> (full-year funding impact). One full-time merit position will be eliminated.	<b>(\$97,090)</b>	<b>1/1.0 SYE</b>	<b>Proposed Action Recommended: take proposed reduction</b>	Emergency Services at the Northwest Center have not been operational for more than one year due to shortages in emergency staff. An alternative Urgent Service program combining same day psychiatry has been successfully substituted with the use of the Mobile Crisis Team in the rare instance of an emergency.	In addition to the current Urgent Service strategy, the use of teleconferencing will be added during calendar year 2012. Some consumers will be transported to Woodburn Mental Health Center (already occurring) and the use of cab vouchers will be used in some instances.	
8	Maintain <b>rates for CSB contracted services</b> at the FY 2012 level (full-year funding impact).	<b>(\$1,075,814)</b>		<p><b>Proposed Action Recommended: take proposed reduction</b></p> <p><b>Option: fund 1/2 year</b></p>	Contract rates remain at FY 2012 levels for more than 125 service contracts for approximately \$40 million in residential, employment and day, and outpatient purchased services. Vendors had not anticipated nor planned for contract rates remaining at the FY 2012 level.	Maintain all contract service rates at FY 2012 levels throughout FY 2013.	<p>Delay implementation of a FY 2013 contract rate increase for CSB contract services until January 1, 2013, resulting in 6 months of savings, approximately \$537,907.</p> <p>Although the Council recommends that contract rate increases for FY 2013 be held or reduced, the Council acknowledges the unanticipated challenge this poses for vendors in managing their costs. More importantly, the result is that service reductions to CSB consumers may occur.</p>
9	Limit <b>Prevention Services</b> (Health Promotion and Wellness) to only those services funded by State/Federal Substance Abuse Prevention and Treatment (SAPT) Block Grant for youth substance abuse prevention and MH First Aid. Seven merit positions will be eliminated.	<b>(\$376,395)</b>	<b>7/7.0 SYE</b>	<b>Proposed Action Recommended: take proposed reduction</b>	Twenty-two positions are funded in the CSB FY 2013 budget. In an effort to retain mission-critical services, the CSB has continued to reduce the number of positions and the funding associated with the health promotion and wellness unit over the past three years. This poses a serious problem for the Human Services System in that a balance of prevention and intervention services must be available if we are ever able to control the front door to more intensive services.		The Council recommends that the Human Services System investigate consolidating the remaining CSB prevention staff and other prevention staff across the system into another agency or create an Office of Prevention Services under the Deputy County Executive. Such an effort may yield opportunities for cost savings and the development of a county-wide strategy that focuses our limited resources on the most pressing health and wellness issues and at-risk behaviors.

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10	Consolidate <b>Youth Day Treatment Services</b>	<b>(\$185,226)</b>		<b>Proposed Action Recommended: take proposed reduction</b>	Reduced staffing of Youth Day Treatment Services will result in an increased wait for mental health and substance use day treatment services with those services located outside of Chantilly, impacting 50-60 youth and families. Alternative, less intensive outpatient services will be made available (including at Chantilly site).	Day services for youth will still be available at three other sites across the county. Youth will receive priority access to less-intensive services while waiting for day services.	
11	Increase <b>managed position vacancies</b> and maintain at least this level throughout FY 2013 (equivalent to at least 10% of the CSB's merit workforce).	<b>(\$1,673,333)</b>		<b>Proposed Action: adjust budget authority by (\$1,100,000)</b>	FY 2013 authorized CSB positions: 1,020/1,016.75 SYE merit positions  The CSB's proposed action would have increased the department's position vacancy factor by an additional estimated 40 positions. The Council recommendation lowers that target to an estimated 12 additional positions. The CSB would need to maintain approximately 95-100 vacant positions to manage within the FY 2013 personnel budget funding levels.	The CSB will continually monitor its position coverage and decide where best to assign positions across the CSB system. Deployed staff might require rapid training to meet licensure and other service requirements.	The Council thinks this is achievable but over time. In the immediate term, the effects of holding this level of positions vacant will impact the existing workforce, system, and customers of the CSB. However, the managed vacancy factor proposed is close to the current actual levels.
12	Reduce the planned expanded staffing of the <b>Intensive Community Treatment Teams (ICTTs)</b> that provide intensive community-based services for chronically homeless individuals that have substance abuse, mental health, and medical issues.	<b>(\$619,797)</b>	<b>9/9.0 SYE</b>	<b>Proposed Action Recommended: take proposed reduction</b>	There are currently 22 positions providing intensive community treatment. The proposed action eliminates the expansion of this service to three new sites. The original plan for service capacity was based on the number of CSB-eligible consumers who are homeless or inadequately housed and not benefiting from less-intensive levels of service currently being offered. Approximately 50-60 homeless individuals per year who could benefit from more intensive mobile mental health and substance use treatment will not be offered services. Existing services such as homeless outreach and targeted case management will continue to be available.	The CSB will assess service demand and the potential for reconfiguring existing ICTT services to ensure that limited capacity targets available services to individuals most in need of intensive community-based case management and support. Four existing teams will be maintained, and their potential to collect more revenue as well as their ability to accomplish the services goals will be evaluated. Improvements in service delivery from efficiency and quality perspectives will be made. ICTT was one of several either new or retained programs that the CSB said could be sustained with revenues generated from Medicaid.	The Council notes that the County Executive's Work Plan incorporates a review of revenue and expenditure projections for CSB programs.
13	Reduce CSB funding for the contract with Crisis Link.	<b>(\$60,000)</b>		<b>Proposed Action Recommended: take proposed reduction</b>	The full-year FY 2013 contract is \$146,688, of which \$86,688 would remain available to the Crisis Link program for FY 2013. The \$60,000 reduction may diminish the regional capacity or limit availability of the service provided through Crisis Link.	As part of the CSB regular FY 2014 budget submission, the CSB intends to determine if efficiencies could be realized by using a volunteer peer support warm line model.	The CSB should pursue opportunities that ensure peer run volunteer services that, along with statewide 211 system, provide access and a range of similar services to county residents.
<b>CSB Actions Previously Taken</b>							
	<b>Reduce Management</b>	<b>(\$307,892)</b>	<b>TBD</b>	<b>Reduction previously implemented by CSB</b>		Eliminate management positions as they become vacant in FY 2013 and revise the span of control for central and service area management.	

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	Reduce Administrative Coverage	(\$156,390)	4/4.0 SYE	Reduction previously implemented by CSB		Eliminate four staff positions for administrative coverage to the CSB Board, to senior managers at Pennino building, the Infant Toddler Connection Program and third-party payor screening in the Financial Assessment and Screening Team.	
	Cancel Psychology Intern Program	(\$115,568)		Reduction previously implemented by CSB		Cancel psychology intern program upon completion of this year's term in August 2012. Savings result in elimination of 3 exempt benefit-eligible positions.	

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